

SENATE BILL 597

By Pody

AN ACT to amend Tennessee Code Annotated, Title 34, Chapter 6, Part 2 and Title 68, relative to persons authorized to make health care decisions for patients.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated, Section 68-11-1808(f), is amended by inserting the word "and" at the end of subdivision (2); deleting the language "; and" at the end of subdivision (3) and substituting instead a period; and by deleting subdivision (4).

SECTION 2. Tennessee Code Annotated, Section 68-11-1808, is amended by adding the following new subsections:

(g) If a transfer cannot be effected in a timely manner pursuant to subsection (f), then the health care provider or institution:

(1) Shall not be compelled to comply; and

(2) Shall fulfill a request for a second opinion made by a person then authorized to make health care decisions for the patient.

(h) This section does not permit a health care provider to continue or administer treatment or a specific kind of treatment after the patient or a person with power of attorney for health care of the patient demanded the health care provider to discontinue or not to administer the treatment or specific kind of treatment.

SECTION 3. Tennessee Code Annotated, Section 34-6-214, is amended by deleting the section and substituting:

A health care provider shall arrange for the prompt and orderly transfer of a patient in accordance with § 68-11-1808(f) to the care of others when the health care

provider, in the health care provider's good faith medical judgment, cannot implement the request of a person with a power of attorney for health care.

SECTION 4. Tennessee Code Annotated, Section 34-6-206, is amended by deleting the section and substituting:

(a)

(1) Except to the extent the right is limited by the durable power of attorney for health care, an attorney in fact designated to make health care decisions under the durable power of attorney has the same right as the principal to receive information regarding the proposed health care, to receive and review medical records, and to consent to the disclosure of medical records.

(2) A full medical record must be provided within twenty-four (24) hours of a written request by the person with power of attorney for health care.

(b)

(1) Except as provided in subdivision (b)(2), an individual with a durable power of attorney for health care is granted twenty-four-hour access to physical in-person visits with the patient to evaluate the patient's condition.

(2)

(A) A health care facility may require that an individual with a durable power of attorney for health care who is entering the facility's premises for purposes of visitation pursuant to subdivision (b)(1) submit to non-invasive health and safety protocols.

(B) The visitation rights specified in subdivision (b)(1) do not apply while the patient is undergoing an invasive procedure or located in a recovery room.

(3) The visitation rights specified in subdivision (b)(1) shall not be terminated, suspended, or waived by the hospital, the department of health, the department of mental health and substance abuse services, or the governor upon the declaration of a disaster or emergency.

SECTION 5. Tennessee Code Annotated, Section 68-11-1809, is amended by deleting the section and substituting:

(a) Unless otherwise specified in an advance directive, a person then authorized to make health care decisions for a patient has the same rights as the patient to request, receive, examine, copy, and consent to the disclosure of medical or any other health care information within twenty-four (24) hours upon a written request.

(b)

(1) Except as provided in subdivision (b)(2), unless otherwise specified in an advance directive, a person then authorized to make health care decisions for a patient is granted twenty-four-hour access to physical in-person visits with the patient to evaluate the patient's condition.

(2)

(A) A health care facility may require that an individual with a durable power of attorney for health care who is entering the facility's premises for purposes of visitation pursuant to subdivision (b)(1) submit to non-invasive health and safety protocols.

(B) The visitation rights specified in subdivision (b)(1) do not apply while the patient is undergoing an invasive procedure or located in a recovery room.

(3) The visitation rights specified in subdivision (b)(1) shall not be terminated, suspended, or waived by the hospital, the department of health, the

department of mental health and substance abuse services, or the governor
upon the declaration of a disaster or emergency.

SECTION 6. This act takes effect upon becoming a law, the public welfare requiring it.